## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
	O teritoria
Check if 24-hour report	on M M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Mission Control, Inc.	10 06 2014
Mailing Address 114 Mansfield Hollow Rd	Amount
# A	
City State Zip Code  Mansfield Center CT 06250-1316	21098.90 Transaction ID : VN7GD9WCHY5
	Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate  Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 26
Jeff Gorell Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disbut 231263.55	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Mission Control, Inc.	10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 114 Mansfield Hollow Rd	
# A	Amount
City State Zip Code	32579.09
Mansfield Center CT 06250-1316	Transaction ID : VN7GD9WCHZ3  Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 01
Donald Norcross Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought  Disb. 2014	ursement For: Primary X General Other (specify) ▶
	Guier (speedly)
(a) SUBTOTAL of Itemized Independent Expenditures	53677.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 410	0 08 2014
Signature	